## NIST PRECISION THERMOMETRY WORKSHOP

## **MARCH 18-22, 2002**

Last name:				
First name	:			
Organization	:			
Address	:			
Room or mail codes	:			
City, state, zip:	·			
Country	:			
Telephone	:			
Facsimile	:			
Email	:			
services:				
Registration Fee: \$1100	for each person	1		
Form of Payment:				
		NIST/Precision Thermother U.S.A. should be wri		ık
☐ MasterCard	□ VISA	☐ Discover Card	☐ Amex	
Card No.:				
Expiration Date:				
Authorized Signature:				
Purchase Order No. / Train (enclose a copy or provide	ning Form :	registration: faxed copy u	nacceptable.)	

REGISTRATION IS NOT GUARANTEED UNTIL PAYMENT IS RECEIVED